

June 9, 2020

Dear Ways and Means Committee Members:

We, the healthcare delivery and social justice organization, Partners In Health (PIH), call on the Ways and Means Committee members to promote inclusion of federal funding for states to directly fund acute food and hygiene needs in the upcoming stimulus package legislation so that all cases and contacts have the ability to safely isolate, regardless of their living situation and irrespective of their zip code.

In the words of our co-founder, Dr. Paul Farmer, “The idea that some lives matter less is the root of all that is wrong with the world.” As an organization founded in Haiti, with a mission to provide a preferential options for the poor in healthcare, we, as PIH, have been engaged in the universal fight against oppression for over thirty five years. The COVID-19 global pandemic has been moving along the fault lines of inequality—and this is not by accident. The correlation between infections and inequalities has played out time and time again throughout history, as TB, HIV, and cholera have shown. Far from being an equalizer, COVID-19 has amplified pre-existing structural inequities tied to race, class, geography and access to the health care system in the US and globally. And much of the structural violence has become even more acutely apparent over the past two weeks as Americans have been educating ourselves on the policy decisions that have, over the past three decades, dramatically increased spending on policing, criminalization and mass incarceration while drastically cutting investments in public health, education, safe housing, healthy food, environmental protection, and other social programs at all levels of government^[1]

In reviewing who has died from COVID-19 in the US, it is painful to face the facts. People with pre-existing conditions (asthma due to exposure to air pollution, hypertension, obesity) are faring worse. In Arizona, where the Latinx community represents about 11% of the population, they represent 32% of the deaths. In Washington, DC, where the Black community represents about 44% of the population, they represent close to 75% of deaths. In Wisconsin, the Black community represents 6% of the population but 39% of the deaths.^[2] As cases started to increase in Massachusetts, where PIH’s US office is based, in March, we quickly recognized that the lessons learned in Haiti and West Africa in responding to infectious disease outbreaks could be rapidly applied to help Massachusetts go on the offense against COVID-19—social distancing and stay-at-home orders would not be enough, especially in communities with high numbers of essential workers. In early April, Governor Charlie Baker decided to make a bold leap and invested in a comprehensive testing, contact tracing, and supported quarantine and isolation strategy that ideally would reduce the number of cases requiring hospitalization and work to actively slow transmission. Today, over two months into this initiative, over 1,900 case investigators, contact tracers, and care resource coordinators have been recruited and are engaging daily with people who have tested positive for COVID-19 as well as each of their contacts to ensure they have the capacity to safely quarantine or isolate.

In the design of the Commonwealth of Massachusetts’ [Contact Tracing Collaborative](#), and in the response efforts we are undertaking in Navajo Nation, Peru, Haiti and other countries, we recognized that implementing social distancing guidelines alone is a fully regressive and structurally racist response. Only those who are privileged enough to have certain jobs are able to fully physically quarantine and that’s why we’ve disproportionally lost so many people who have been deemed as essential workers to COVID-19—they didn’t have the ability to decide between socially isolating or not showing up for work

^[1] Freedom to Thrive: Reimagining Safety & Security in Our Communities. The Center for Popular Democracy, July 4, 2017. <https://populardemocracy.org/news/publications/freedom-thrive-reimagining-safety-security-our-communities>

^[2] Growing Data Underscore that Communities of Color are Being Harder Hit by COVID-19. Kaiser Family Foundation, April 21, 2020. <https://www.kff.org/coronavirus-policy-watch/growing-data-underscore-communities-color-harder-hit-covid-19/>

to feed their families. The role of care resource coordinators—to link people to available social services in their communities—food, medication delivery, hygiene supplies, locations to safely isolate away from family members, etc. has therefore been essential. To date, the care resource coordinators have received more than 7,000 requests for social assistance, with about 5.7% of cases/contacts reporting inability to safely self-isolate or quarantine. Food is the most common social support need by type – rent/utilities assistance, finding a primary care provider, threat of eviction, PPE and IPC are also common requests.

One recent testimony from a care resource coordinator highlights the importance of the daily human connection and linkage to support for vulnerable communities. “This family had several sick household members, and the woman I have been working with lost her essential job and income. She was **very reluctant to ask for any help**, and only had a food request in. I asked questions about whether she had paper products (none), disinfectants (none), and then paused to chat about how a lot of people need help, and tried to normalize that right now, people who can help would like to so she and her family could get better. **I also let her know that her utilities could not be shut off and she could not be evicted, which she was not aware of and relieved by.** All of this made her feel quite relieved, and I assured her I would make sure these needs were taken care of. Fortunately, **Framingham had an emergency line for urgent needs, and someone who spoke her language to call her.** I just did her follow up today, and **all of her needs were met!**”

As the days and weeks progress, and more and more states move to phase in the reopening of non-essential services, **we call on the Ways and Means Committee members to continue to promote inclusion of federal funding for states to directly fund acute food and hygiene needs in upcoming stimulus package legislation so that anyone who is found to be a case or a contact of a case has the ability to safely isolate, regardless of their living situation and irrespective of their zip code.** We expect to see increases in the number of cases and contacts as stay at home orders are removed. We are already facing shortages in access to food and other services as funds have run out. We are counting on you to enact systems change to prevent unnecessary deaths and turn the tide on unjust racial disparities in health.

Additional recommendations include:

- As a means of mitigating distrust in public authorities and the health system while understanding its historical underpinnings within communities, invest in setting up community testing centers utilizing FQHCs and other community resources rather than sending in the national guard
- As laid out in the [Heroes Act](#) where \$75B is allocated for integrated contact tracing and supported isolation, urgently invest in a contact tracing workforce that includes full-time paid contact tracing staff as the most effective and efficient approach to building surge capacity (such an initiative also represents a unique opportunity to help put people back to work in the midst of our current employment crisis, and potentially provide on-ramps into longer-term career pathways in health services)
- Build care coordination into program design and workforce planning, as an essential component for contact tracing to be effective (to ensure all have the supports required to safely isolate/quarantine as needed)
- Engage and reinforce existing community health workforce partners and cadres—including Community Health Workers
 - Prioritize hiring from hardest-hit and most vulnerable communities; ensure recruiting and workforce partners have clear accountability for equity and diversity in hiring
 - Engage FQHCs as key implementation and staffing partners where possible
 - Build/retain capacity for ongoing in-service training

- Consider establishing a community advisory board
- Build into program design ways to support local health departments to sustain expanded contact tracing and emergency epidemic response capacity over the medium to long-term as a means of reinvesting in community and public health capacity

In order to prevent further disparities in who continues to die from COVID-19 in the US in the days, weeks, and months ahead, flowing resources directly into communities most impacted, via jobs as contact tracers, care resource coordinators and other essential health workers may not only ensure representation of communities of color more prominently in the health care system, but work to build trust and lead to better health outcomes. In the medium to long term, working to abolish policing systems in their current form and reinvesting funds into community safety initiatives, safe housing, environmental protection and cleanup initiatives, education, and community and primary health care through new policies will ideally work to reduce disparities and lead to healthier communities across the board.

Sincerely,

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